| BAYENT ARRIVATION COS STREET | | | | Application or Docket Number | | | | |
|---|--|---------------------------|-------------------|--|-------------------------------|--------------------|-------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO Effectiv October 1, 2003 | | | | 10725490 | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | SMAL TYPE | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | | |
| TOTAL CLAIMS | | | RAT | E FEE | 7 | RATE | FEE | |
| FOR . | NUMBER FILED . | NUMBER EXTRA | BASIC | FEE 385.00 | OR | BASIC FE | 770.00 | |
| TOTAL CHARGEABLE CLASHS | 6 minus 20= 0 | | XSS | ·- | OR | X\$18- | | |
| INDEPENDENT CLAIMS | of minus 3 = | • 6 | XAS | | OR | X86= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | 1145 | | ОЯ | +290= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | TOTA | u l | 4 | TOTAL | 170 | |
| CLAIMS AS AMENDED - PART II | | | | | J | OTHER | | |
| (Cotumn 1) | (Cotum | m 2) (Column 3 | SMAI | TEMILLA | OR | SMALL | | |
| REMARKING AFTER AMENOMENT Tabal Independent | MUMB PREVIO PAID F | MER PRESENT USLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL | |
| Total | Mirrus en | 0 -0 | X5 9- | | OR | X\$18 | | |
| 3 | Minus on 2 | -0 | X43- | | OR | X88= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | +145- | | OF | +290= | 7 | |
| | | | YOY | | Z | TOTAL | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | |
| S 2 9 2 9 CLAMS REMARKING AFTER AMERICAGENT Trans Independent - 1 | HIGHE MAME PREVIOL PAID P | ER PRESENT | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total . | dinus - 2 | 0-0 | 23.9- | | OR | X\$18= | | |
| FIRST PRESENTATION OF MUL | TIPLE DEPENDENT C | 3 - | X43= | | ОЯ | X86= | | |
| | | | +145- | | OR | +290- | | |
| | | | ADDIT FE | | OR A | TOTAL COST, FEE | - | |
| (Column 1) | (Column | | | | | | | |
| 9/29/UN APTER AMERICANT | HUGHES HUMBE PREVIOUS PAID PO | R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE/ | |
| Total • M | inus - 20 | 0 .0, | X\$ 9- | | OR T | X\$18a | / | |
| FIRST PRESENTATION OF MULT | | 3 • // | ×43- | | oia l | X86- | X | |
| | | | +145= | |)A | 290- | /- | |
| If the entry in column 1 is tens than the entry in column 2, write "0" in column 3, " if the "Righest Number Previously Pald Fer" IN 114B SPACE is less than 20, order "20." | | | | | | MIAL | ╧ | |
| The "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEEOR ADDIT, FEE | | | | | | | | |

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